

MEDI-CAL HEALTH CARE PROGRAM UPDATE

September 25, 2003



CORRECTION! **A&D FPL Program**



The State Department of Health Services has notified counties that the disregard amounts for A&D couples quoted in All County Welfare Directors Letter 03-21, dated 4/23/03, are incorrect for the period

June 1, 2003 through December 31, 2003. The correct figures are:

SSI/SSP payment level for a couple	\$1382.00
Correct disregard amount	\$ 372.00

Please note that this information also corrects information contained in Administrative Directive 4095, Supp. V, dated 7/23/03, which gives the disregard amount for a couple as \$373.00.

INS to BCIS

In March 2003, the responsibility for providing immigration related services and benefits such as naturalization and work authorization was transferred from the Immigration and Naturalization Services (INS) to the Bureau of Citizenship and Immigration Services (BCIS). The INS became part of the U.S. Department of Homeland Security and its functions were divided into various bureaus of the department. BCIS continues to provide services such as Visas, Green Cards, Naturalization Services and Immigration Forms.



RECENT MEDI-CAL ADMINISTRATIVE RELEASES

Type & Number	Date	Subject
AD 4095, Supplement V	7/23/03	Aged and Disabled Federal Poverty Level (A&D FPL) Program
AD 4448	7/21/03	Medi-Cal Senate Bill (SB) 87 Redetermination Process for All Discontinued SSI/SSP Beneficiaries as Ordered in the <u>Craig v. Bonta</u> Lawsuit
AD 4449	8/04/03	Medi-Cal Intercounty Transfers (ICTs)
AD 4452	8/14/03	Medi-Cal Midyear Status Report (MSR)

MEDI-CAL MIDYEAR STATUS REPORT Treatment of "Undeliverable" MSRs

When the MSR has been returned to the District office as undeliverable:

- 1) Conduct ex parte to determine if the mailing address is correct.
- 2) If a more current address is available, resend the MSR.
- 3) If not, terminate the entire case due to loss of contact.

Districts are to **remove the postage-paid return envelopes** from all MSR "undeliverable" mail and **return them to Assets Management** following existing procedures. These unused envelopes will be recycled for future MSR mailings.

Retention Worker Pilot a Success!

Based on departmental termination and denial reports, "Client's Request" is one of the most common reasons for Medi-Cal terminations and denials. Oftentimes, even though the family is requesting that their case be closed, they remain eligible for Medi-Cal. As part of an educational outreach campaign funded by the Robert Wood Johnson Foundation, staff in the El Monte district participated in a Retention Worker pilot program.

The pilot program was designed to help families keep their healthcare coverage through personal contact with a specialized Retention Worker. During the pilot, the Retention Worker made contact with the families via the telephone and talked to them about the importance of keeping their Medi-Cal coverage. Of the 46 referrals made during the pilot, the Retention Worker was able to convince 31 families to retain their Medi-Cal coverage. This pilot proves that through education, families who might otherwise request that their healthcare coverage be stopped, if given the opportunity and the resources to make a more educated decision, they will choose to keep their coverage.

PUBLISHED BY:
The Los Angeles County
Department of Public Social Services
Bureau of Health, Nutrition & Community Services

FUTURE ACTION CONTROLS (FACs)

State Auditors routinely review cases from counties to determine if correct benefits are issued to eligible beneficiaries. A number of actions which could affect your caseload may be found in your Future Action Controls on LEADER. Certain conditions may be related to eligibility or share of cost and, without timely action, could cause errors to occur. These controls can be valuable tools in maintaining a caseload of eligible beneficiaries. Take a minute to check your controls each day and take action in a timely manner. It could save you time and audit errors in the future.

Here are some of the major FACs currently in LEADER that relate to Medi-Cal:

FAC #	Subject Title	Grace Days	Description	System Action
			SYSTEM MODIFIABLE FACs	
0032	M/C RD not returned	5	Return of Redetermination form not posted. If received, post return and resolve this control. Post in Client Comments phone contact. If form not returned in 5 working days, system will issue Reminder with extended due date.	Mails out Reminder if not disposed within 5 days.
0050	Fail Return Information On Newborn	5	Client has failed to return information about newborn in response to two requests by system. Action will be taken on MAO case in five working days.	Runs ED/BC if not disposed after 5 days.
			SYSTEM TO USER FACs	
0014	Child Turns 18 & Tax Dependent	5	Child is turning 18 years of age next month, and is a tax dependent of a parent(s) outside his home. Review case to determine if situation still exists. If yes, action may be required.	Goes to ES after 5 days if not disposed.
0016	Person Turns 64 Yrs & 10 Mos	5	Person has turned 64 yrs & 10 mos, may be eligible for income from SSA & Medicare coverage. Review case to determine if there is possible Social Security coverage. If yes, contact beneficiary to determine if they have applied and when. NOTE: Medicare Part A coverage is MANDATORY for Medi-Cal beneficiaries who are 65 years or older with SIS. They should be told to apply for this benefit at the local Social Security office when they are 64 years and 9 months.	“
0018	DAPD	5	Worker to contact DAPD 80 days after date the DAPD packet was sent	“
0074	M/C Property Utilization Time Limit	5	There is a 6 month time limited exemption for property utilization. No action has been taken. Eligibility Worker (EW) needs to review case & take follow-up action.	“
0078	Potentially Available Income	5	Due date for receiving potentially available income (worker's comp claim, court recovery, or other claims) has been reached. EW to review case and determine if beneficiary has reported this pending income.	“
0110	Pending Change (not authorized)	5	Data change has been input, but ED/BC was not run and authorization not completed for this change. Review & run ED/BC and authorization if needed.	“
0130	DAPD Re-Exam	5	DAPD re-exam is due next month. EW needs to start DAPD process.	“
0139	DAPD Paperwork	5	DAPD packet was not sent within 10 calendar days of when MC 223 was signed by applicant/beneficiary. EW must review case. Refer to M/C Procedures Manual 22c-6.6 for further instructions.	“
0164	DAPD Referral - 80 Day Control	5	The completed DAPD referral packet has not been sent to the State by the 80 th day, or was returned for correction. EW to review case (may need to send beneficiary MC 179).	“
0237	ICT Transfer	5	Beneficiary has moved out of the County and ICT should be initiated. EW is to transfer case to outgoing ICT file within 1 day.	“
0239	ICT/Intake EW to Process Incoming ICT	5	Incoming ICT received 25 days ago and has not yet been processed.	“
0251	Disposition of MAO application	5	30-day deadline for disposition of MAO pending case is due within 5 working days. Review to determine reason for delay in approval/denial action.	“
0343	Minor Consent MC4026 Returned?	5	System has no record of new MC 4026 received for prior month. Review to determine problem. If minor has returned MC 4026, input return of the form immediately.	“
0821	Batch SSA Cola Update Failed	5	Batch SSA Income Cost-of-Living updates failed for an individual on this case. Review listing and take corrective action.	“